The Non-Employee's Guide to Traveling for the State

HOW TO GET STARTED

If you have never traveled for the State or it has been over 6 months since you received any compensation from the state, you must complete and sign a W-9 form. This form is used to input your information into the State Accounting Information System (AFIS) to properly identify you. Your personal information will be entered into AFIS for future reimbursements. Once a year AFIS is purged of all records, so you may need to resubmit this form at a future date. In addition, the address listed on this form needs to match the address on your travel claim form. If these are different, then the accounting office will delay processing your claim until they verify the correct address.

Obtain a blank copy of the Arizona Department of Education's travel reimbursement claim form for non-State employees. It is a good idea to make copies of this form and have them with you when you travel. It is also a good idea to keep a blank travel claim on a clipboard in the car while traveling. This will help you accurately track your mileage, (beginning and ending odometer readings), travel addresses (departure and arrival) and times of travel. These fields are critical to being reimbursed promptly. Because the Department of Education now uses the same policies for employees and non-employees these areas on the form must be completely filled out. REMEMBER TO USE INK – PENCIL IS NOT ACCEPTED.

TRAVEL REIMBURSEMENT CLAIM FORM FOR NON-EMPLOYEES

- 1. Record your name and address as it appears on your W-9 form be sure to include your phone number.
- 2. Record the name of the conference or training in the "**Purpose of Travel**" field be sure to be specific: Ex. "GED 2002 Winter Intersession" is clearer than "GED Training".
- 3. Record your license plate number if you are claiming mileage.
- 4. For each day of travel or each day you are at a conference fill in each field across the row completely:
 - a. Date
 - b. Place departed use complete address of the departure location
 - c. Record the time you left (this is very important to the accounting office; it is how they determine if you are eligible for reimbursement for your meals).
 - d. Place arrived at exact address include the name of the hotel if applicable
 - e. Time Record time of arrival.
 - f. Odometer these must be actual readings not calculations. We reimburse at 34.5 cents per mile
 - g. Miles this is where you put the total miles traveled for that day.
 - h. Miles X 0.345
 - i. Itemized meals use the actual cost of your meal or the per diem rate with B (Breakfast), L (lunch) or D (dinner) noted. Ex. If you paid for breakfast and dinner on a travel day you would put in this field \$22.00 B, D or you could put the actual amounts with the B and D meal notation. Meal receipts are no longer required.
 - j. Lodging If you pay for your room, put in the cost of the room and taxes for each night. You must include an original receipt with your travel claim form.
 - k. Misc. Expenses with receipts: this is for parking charges or shuttle charges.
 - I. Total Expenses: Add the row's totals and record here.

Continue down the rows for each day of travel. If you are at the same place for several days, as you would be at a conference, for each day record the date, write "conference" in the "Place Departed from" field, record the time your day starts, leave Place Arrived blank, record the ending time, leave mileage fields blank, in meals record the meals you paid for with B, L, D ex. **\$29.50 B, L, D** is sufficient for the day's meals. Per Diem and meal rates are listed below. Fill out the next two fields if appropriate and total your expenses.

Total each column including the overall total.

MEAL RATES

Maximum reimbursement is as follows:

Breakfast \$ 7.00 Lunch \$ 7.50 Dinner \$15.00

Total \$29.50 per day

B= breakfast, L= Lunch, D= Dinner

If you are attending an event that provides a meal, you will not be reimbursed for that meal.

NOTE: The meal for which reimbursement is being sought must be purchased and consumed 35 miles or more from the traveler's home.

LODGING

Lodging costs incurred within a 35-mile radius of residence will not be qualified for reimbursement. Original receipts are required for lodging. These receipts are to show the name of the establishment, the arrival date and departing date. It must also show itemized daily charges. It is the travelers' responsibility to obtain the required information from the establishment. When an overnight stay is required, you are to stay at an establishment that is lower than or equal to the allowable reimbursement for that city. Keep in mind if the city is allowed \$54.00 per night, this is a base rate and any applicable taxes will be reimbursed.

Example: Yuma has an allowable rate of \$58.00. Your hotel is \$58.00 per night plus \$7.25 in taxes, totaling \$65.25. This what you would be reimbursed.

MISCELLANEOUS

PLEASE NOTE: The State will not reimburse meals or lodging, if the distance traveled is 35 miles or less each way.

Personal phone calls are not reimbursable.

Receipts are required for parking charges. If you use a meter, please note that on your claim. If you attend a Seminar or Conference, attach a copy of the brochure with your claim.

PREPARING YOUR CLAIM

Make sure your travel claim for is **completely and accurately** filled out.

Attach all receipts to the claim. If you have small receipts, please attach them to a plain, 8.5 x 11" sheet of paper. Print your name on this sheet of paper.

Make a copy of all documents and keep for your records!

Sign, and send the original claim to:

Fred U. Reiter
Department of Education, Bin VIR
1535 West Jefferson
Phoenix, AZ 85007

Phone: 602.258.2410, ext. 218

Fax: 602.258.4986

Email: freiter@ade.az.gov

Fred will review your claim compliance and submit it to Accounting. Please visit the State of Arizona's General Accounting Office website for detailed information: www.gao.state.az.us/index.asp

Note: If you do not provide the required information above, your reimbursement request may be returned to you for completion.